

Commonwealth of Massachusetts

Center for Health Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

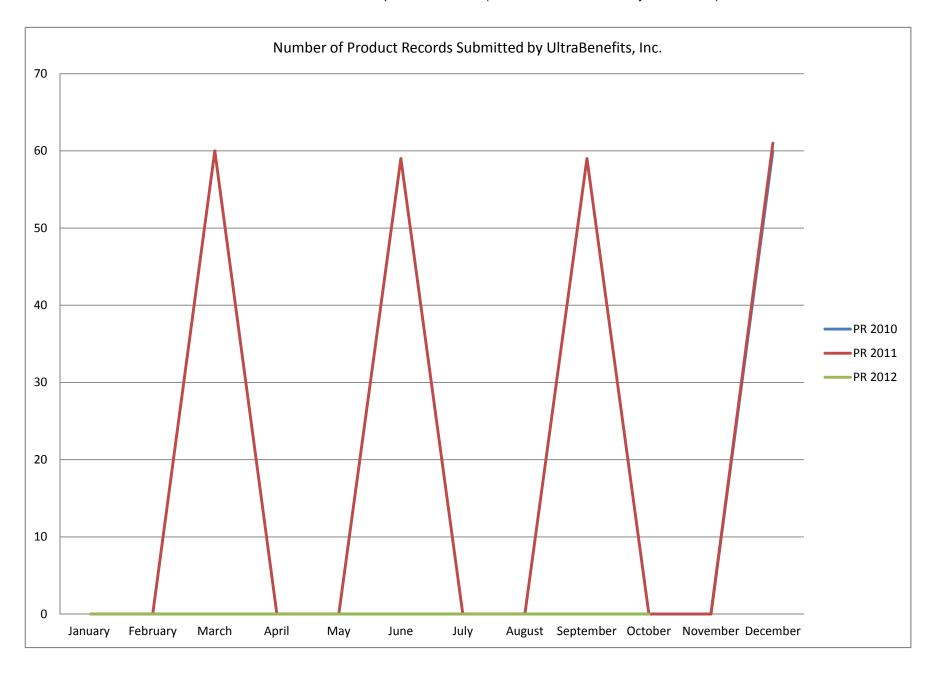
UltraBenefits, Inc.														
	Submis													
File	sion													
Type*	Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	60	60
PR	2011	0	0	60	0	0	59	0	0	59	0	0	61	239
PR	2012	0	0	0	0	0	0	0	0	0	0			0
ME	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
ME	2010	0	0	0	0	0	0	0	0	0	0	0	4,033	4033
ME	2011	4,300	3,808	3,796	4,216	3,495	3,510	4,319	4,314	782	4,416	4,422	2,165	43,543
ME	2012	0	0	0	0	0	0	0	0	0	0			0
PV	2011	21,780	21,337	21,983	21,903	21,983	22,013	21,925	21,878	22,160	22,021	21,987	22,237	263,207
PV	2012	22,677	23,221	23,250	22,880	23,040	23,185	22,701	23,084	23,192	23,038			230,268
MC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2010	3,724	4,265	3,844	4,042	3,723	3,522	3,870	2,875	4,572	3,725	4,180	5,517	47,859
MC	2011	3,982	4,510	5,810	5,092	4,982	6,405	4,413	5,170	5,017	4,132	4,426	5,103	59,042
MC	2012	4,714	5,225	5,609	5,119	6,052	7,004	3,716	6,448	5,883	5,068			54,838
PC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
РС	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2008	339	273	324	258	381	358	340	291	384	337	265	283	3833
DC	2009	344	256	408	448	359	377	473	388	485	309	335	285	4467
DC	2010	308	307	558	319	215	339	359	489	270	275	278	452	4169
DC	2011	225	165	448	252	398	184	336	310	316	267	260	208	3369
DC	2012	255	275	222	330	542	345	219	316	583	349			3436

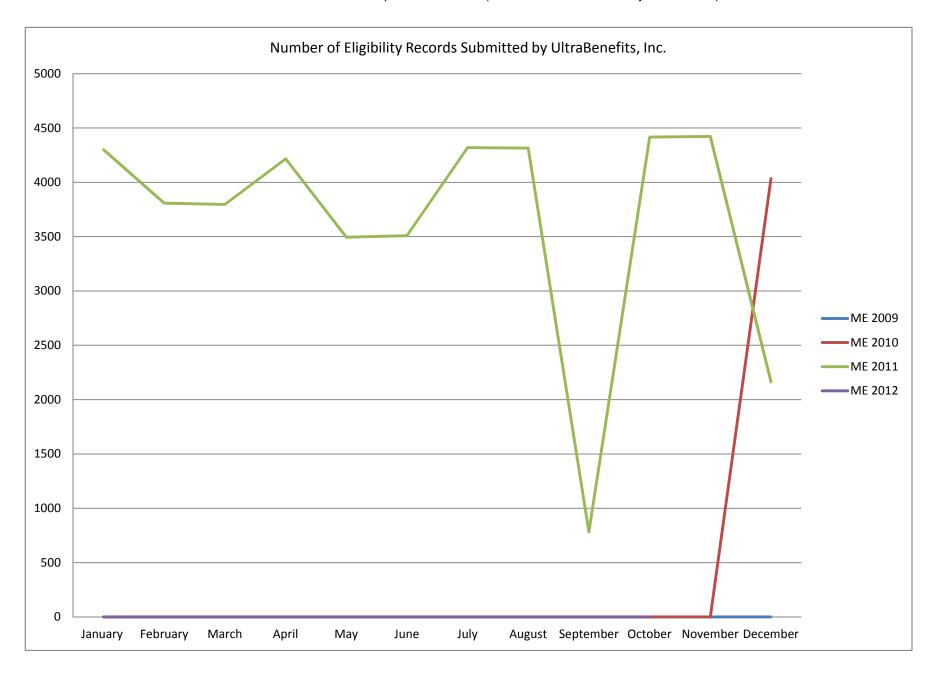
*Key: PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

 These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.







2/28/2013

